

113TH CONGRESS
2D SESSION

S. 2763

To amend the Older Americans Act of 1965 to create a collaborative network with a single point of entry for services and supports, to improve programs to prevent elder financial exploitation, to create a community care wrap-around support demonstration program, and to create a national campaign to raise awareness of the aging network and promote advance integrated long-term care planning, and for other purposes.

IN THE SENATE OF THE UNITED STATES

JULY 31, 2014

Mr. MERKLEY introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To amend the Older Americans Act of 1965 to create a collaborative network with a single point of entry for services and supports, to improve programs to prevent elder financial exploitation, to create a community care wrap-around support demonstration program, and to create a national campaign to raise awareness of the aging network and promote advance integrated long-term care planning, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Older Americans Com-
3 munity Access Revitalization and Education Act” or the
4 “Older Americans CARE Act”.

5 **SEC. 2. DEFINITIONS.**

6 (a) AGING AND DISABILITY RESOURCE CENTER.—

7 (1) IN GENERAL.—Section 102(4) of the Older
8 Americans Act of 1965 (42 U.S.C. 3002(4)) is
9 amended to read as follows:

10 “(4) The term ‘Aging and Disability Resource
11 Center’ means a collaborative network that has a no
12 wrong door single entry point system (as described
13 in section 10202(c)(5)(A) of the Patient Protection
14 and Affordable Care Act (42 U.S.C. 1396d note; re-
15 ferred to individually in this Act as a ‘no wrong door
16 system’)) and a comprehensive and integrated pro-
17 gram that—

18 “(A) is established by the State agency
19 and administered as identified by the State in
20 the State plan described in section 307 as part
21 of a State system of integrated long-term care
22 for individuals with disabilities and older indi-
23 viduals;

24 “(B) is planned and implemented in a
25 manner that involves formal partnerships, es-

1 tablished between aging and disability agencies
2 and organizations—

3 “(i) that are established so that indi-
4 viduals of all ages with needs for inte-
5 grated long-term care, can be properly
6 reached and served within their commu-
7 nities, while maximizing self-direction; and

8 “(ii) each of which is comprised of—
9 “(I) the State agency and area
10 agencies on aging at the State and
11 local levels, respectively; and

12 “(II) State and local disability
13 agencies and organizations, including
14 State independent living councils and
15 centers for independent living, entities
16 serving individuals with develop-
17 mental, physical, mental, or cognitive
18 disabilities, consumers, advocates, and
19 other entities and individuals;

20 “(C) provides a coordinated system for
21 providing—

22 “(i) an approach for providing access,
23 information, referrals, and assistance that
24 is person-centered, is a no wrong door sys-
25 tem, goes beyond providing access, infor-

1 mation, referrals, and assistance available
2 under or coordinated through this Act, and
3 serves all individuals regardless of age, in-
4 come, disability, or state of long-term care
5 services and supports planning;

6 “(ii) comprehensive information on
7 the full range of available public and pri-
8 vate programs of health and integrated
9 long-term care, and options counseling,
10 service providers, and resources for such
11 programs, within a community and within
12 a State, including information on the avail-
13 ability of integrated long-term care;

14 “(iii) personal and peer counseling to
15 assist individuals in assessing their existing
16 or anticipated needs and goals for inte-
17 grated long-term care, and assisting the in-
18 dividuals in developing and implementing a
19 plan for integrated long-term care, con-
20 sistent with their desires and designed to
21 meet their specific priorities, goals, needs,
22 and circumstances; and

23 “(iv) an approach that supplements
24 consumer access to the full range of pub-
25 licly supported programs of integrated

1 long-term care, including home-based and
2 community-based options, for which con-
3 sumers may be eligible; and

4 “(D) builds on but does not replace the
5 roles and responsibilities of entities in the State
6 aging network to support people seeking access
7 to community living opportunities, as specified
8 in this Act, or of other aging and disability
9 agencies and organizations.”.

10 (2) TECHNICAL AMENDMENT.—Section 102(1)
11 of the Older Americans Act of 1965 (42 U.S.C.
12 3002(1)) is amended by inserting “, except when
13 used as part of the term ‘financial abuse’,” before
14 “means”.

15 (b) LGBT INDIVIDUALS.—

16 (1) IN GENERAL.—Section 102 of the Older
17 Americans Act of 1965 (42 U.S.C. 3002) is amend-
18 ed—

19 (A) in paragraph (24)—

20 (i) in subparagraph (B), by striking
21 “and” at the end;

22 (ii) in subparagraph (C), by striking
23 the period and inserting “; and”; and

24 (iii) by adding at the end the fol-
25 lowing:

1 “(D) status as an LGBT individual.”;

2 (B) by redesignating—

3 (i) paragraphs (36) through (54) as

4 paragraphs (38) through (56), respectively;

5 and

6 (ii) paragraphs (34) and (35) as para-

7 graphs (35) and (36), respectively;

8 (C) by inserting after paragraph (33) the

9 following:

10 “(34) The term ‘LGBT’, used with respect to

11 an individual, means a lesbian, gay, bisexual, or

12 transgender individual.”; and

13 (D) by inserting after paragraph (36), as

14 so redesignated, the following:

15 “(37) The term ‘minority’, used with respect to

16 an individual, includes a lesbian, gay, bisexual, or

17 transgender individual.”.

18 (2) CONFORMING AMENDMENT.—Section

19 215(e)(1)(J) of the Older Americans Act of 1965

20 (42 U.S.C. 3020e–1(e)(1)(J)) is amended by strik-

21 ing “minorities” and inserting “minority individ-

22 uals”.

1 **SEC. 3. CREATION OF NATIONAL CAMPAIGN TO RAISE**
2 **AWARENESS OF THE AGING NETWORK AND**
3 **PROMOTE ADVANCE INTEGRATED LONG-**
4 **TERM CARE PLANNING.**

5 (a) IN GENERAL.—Section 202(b) of the Older
6 Americans Act of 1965 (42 U.S.C. 3012(b)) is amended
7 by striking paragraph (6) and inserting the following:

8 “(6) promote, through a coordinated public
9 education and outreach campaign carried out by the
10 National Eldercare Locator Service described in sub-
11 section (a)(21) and in coordination with other appro-
12 priate Federal agencies—

13 “(A) enhanced awareness by the public of
14 the importance of planning in advance for inte-
15 grated long-term care; and

16 “(B) the availability of national, State, and
17 local information and resources to assist in such
18 planning, as well as the existence of area agen-
19 cies on aging and other aging service providers
20 to provide direct assistance with such plan-
21 ning;”.

22 (b) AUTHORIZATION OF APPROPRIATIONS.—Section
23 216 of the Older Americans Act of 1965 (42 U.S.C.
24 3020f) is amended—

25 (1) by redesignating subsection (c) as sub-
26 section (d); and

1 (2) by inserting after subsection (b) the fol-
2 lowing:

3 “(c) NATIONAL CAMPAIGN.—There is authorized to
4 be appropriated to carry out section 202(b)(6),
5 \$3,000,000 for each of fiscal years 2015 through 2019.”.

6 **SEC. 4. NO WRONG DOOR NETWORKS.**

7 Section 202(b)(8) of the Older Americans Act of
8 1965 (42 U.S.C. 2012(b)(8)) is amended—

9 (1) in the matter preceding subparagraph (A),
10 by striking “Aging and Disability Resource Cen-
11 ters—” and inserting “networks, such as Aging and
12 Disability Resource Centers, that are built on infor-
13 mation, referral, and assistance programs run by
14 aging and disability agencies and are collaborative
15 networks with no wrong door systems—”;

16 (2) in subparagraphs (A), (C), and (D), by
17 striking “long-term care” each place it appears and
18 inserting “integrated long-term care”;

19 (3) in subparagraph (A), by striking “commu-
20 nity-based care” and inserting “community-based
21 care services and supports”; and

22 (4) in subparagraph (B), by striking “their
23 care” and inserting “their care services and sup-
24 ports”.

1 **SEC. 5. SUPPORTIVE SERVICES AND SENIOR CENTERS PRO-**

2 **GRAM.**

3 Section 321(b)(1) of the Older Americans Act of
4 1965 (42 U.S.C. 3030d(b)(1)) is amended by inserting
5 “or modernization” after “construction”.

6 **SEC. 6. PILOT PROJECT ON SERVICES FOR RECIPIENTS OF**

7 **FEDERALLY ASSISTED HOUSING.**

8 Part A of title IV of the Older Americans Act of 1965
9 (42 U.S.C. 3032 et seq.) is amended by adding at the end
10 the following:

11 **“SEC. 423. PILOT PROJECT ON SERVICES FOR RECIPIENTS**

12 **OF FEDERALLY ASSISTED HOUSING.**

13 “(a) DEFINITION.—In this section, the term ‘feder-
14 ally assisted housing’ means—

15 “(1) multifamily housing financed, insured, or
16 subsidized by the Rural Housing Service of the De-
17 partment of Agriculture or by the Department of
18 Housing and Urban Development; or

19 “(2) housing provided under the Low Income
20 Housing Tax Credit program carried out under sec-
21 tion 42 of the Internal Revenue Code of 1986.

22 “(b) FUNDING.—The Assistant Secretary may pro-
23 vide funding for a service provided under this Act (includ-
24 ing title V) packaged and targeted for residents of feder-
25 ally assisted housing. The Assistant Secretary may provide
26 such funding for a period of 2 years.

1 “(c) RECIPIENTS.—The Assistant Secretary shall
2 provide funding made available under subsection (b)
3 through area agencies on aging, other entities approved
4 by the Assistant Secretary, or designees of the agencies
5 or entities, to not-for-profit owners or managers of the
6 housing.

7 “(d) EVALUATIONS AND REPORTS.—

8 “(1) EVALUATIONS.—Each agency, entity, or
9 designee that receives funding under this section
10 shall evaluate the effectiveness of the services pro-
11 vided through the funding.

12 “(2) REPORTS.—The agency, entity, or des-
13 ignee shall, not later than 90 days after the end of
14 the funding period, prepare and submit to the As-
15 sistant Secretary a report containing the results of
16 the evaluation.

17 “(e) AUTHORIZATION OF APPROPRIATIONS.—There
18 are authorized to be appropriated to carry out this section
19 such sums as may be necessary for each of fiscal years
20 2015 through 2017. Such sums shall remain available
21 through fiscal year 2018 for the purpose of carrying out
22 the evaluations and reports under subsection (d).”.

1 **SEC. 7. COMMUNITY CARE WRAP-AROUND SUPPORT DEM-**2 **ONSTRATION PROGRAM.**

3 Part A of title IV of the Older Americans Act of 1965

4 (42 U.S.C. 3032 et seq.), as amended by section 6, is fur-

5 ther amended by adding at the end the following:

6 **“SEC. 424. COMMUNITY CARE WRAP-AROUND SUPPORT**7 **DEMONSTRATION PROGRAM.**

8 “(a) DEFINITIONS.—

9 “(1) COMMUNITY CARE WRAP-AROUND SUP-
10 PORT PARTNERSHIP.—The term ‘community care
11 wrap-around support partnership’ means a partner-
12 ship that—13 “(A) carries out a program that serves not
14 fewer than 30 eligible older individuals;

15 “(B) includes—

16 “(i) a designated care coordinator,
17 who may be a nurse, registered dietitian,
18 case manager, health coach, or social work-
19 er, from an eligible entity and who, in con-
20 sultation with a primary care physician or
21 another relevant specialist described in
22 clause (ii), will be responsible for coordi-
23 nating services and supports offered under
24 title III for an older individual; and25 “(ii) a consulting primary care physi-
26 cian, or other relevant specialist, receiving

1 compensation for participation in the part-
2 nership in a manner determined by the As-
3 sistant Secretary; and

4 “(C) may include an individual—

5 “(i) who is listed in the plan for the
6 community care wrap-around support part-
7 nership described in subsection (e)(2);

8 “(ii) for whom the eligible older indi-
9 vidual gives consent to participate in the
10 community care wrap-around support part-
11 nership, as that partnership relates to the
12 eligible older individual; and

13 “(iii) whose relationship to the older
14 individual is that of—

15 “(I) a family member, close per-
16 sonal friend, or unpaid designated
17 caregiver;

18 “(II) a legal or financial advisor;

19 “(III) a home care provider;

20 “(IV) a provider of transpor-
21 tation;

22 “(V) a registered dietitian; or

23 “(VI) a rehabilitation profes-
24 sional.

1 “(2) ELIGIBLE ENTITY.—The term ‘eligible en-
2 tity’ means—

3 “(A) an area agency on aging;

4 “(B) a home or community-based provider
5 of the activities described in subsection (d)
6 (such as a home care agency, or entity oper-
7 ating a senior center or adult day care facility);
8 or

9 “(C) another qualified entity the Assistant
10 Secretary determines to be appropriate to carry
11 out the activities described in subsection (d).

12 “(3) ELIGIBLE OLDER INDIVIDUAL.—The term
13 ‘eligible older individual’ means an older individual
14 who—

15 “(A) is age 65 or older;

16 “(B) who is eligible to receive assistance
17 under this Act;

18 “(C) who elects to enroll in the demonstra-
19 tion program, as described in subsection (e);
20 and

21 “(D) who—

22 “(i) has difficulty completing 2 or
23 more activities of daily living;

1 “(ii) has had at least one nonelective
2 hospital admission within the past 12
3 months;

4 “(iii) has received acute or subacute
5 rehabilitation services within the past 12
6 months; or

7 “(iv) meets such other criteria as the
8 Assistant Secretary determines to be ap-
9 propriate.

10 “(b) PROGRAM AUTHORIZED.—

11 “(1) IN GENERAL.—The Assistant Secretary
12 shall establish a demonstration program (referred to
13 in this section as the ‘demonstration program’ and
14 to be commonly known as the ‘community care ini-
15 tiative’) through which the Assistant Secretary shall
16 make grants to eligible entities in order to enable
17 such eligible entities to—

18 “(A) establish community care wrap-
19 around support partnerships; and

20 “(B) support the partnerships, enabling
21 the partnerships to carry out the activities de-
22 scribed in subsection (d).

23 “(2) DURATION.—Each grant awarded under
24 this section shall be for a period of 2 years.

25 “(c) APPLICATION.—

1 “(1) IN GENERAL.—Each eligible entity desir-
2 ing a grant under this section shall submit an appli-
3 cation to the Assistant Secretary at such time, in
4 such manner, and accompanied by such information
5 as the Assistant Secretary may reasonably require.

6 “(2) CONTENTS.—The application described in
7 this subsection shall include, at a minimum—

8 “(A) a plan describing the individuals, as
9 listed in subsection (a)(1)(C), that will, upon
10 consent of an eligible older individual, partici-
11 pate in the community care wrap-around sup-
12 port partnership as that partnership relates to
13 the eligible older individual;

14 “(B) a clear description of—

15 “(i) the protocols the eligible entity
16 will implement to identify the needs of
17 older individuals receiving services and
18 supports through the partnership;

19 “(ii) the range of intervention and
20 supportive services and supports that the
21 eligible entity will implement; and

22 “(iii) preliminary evidence of the effi-
23 cacy or effectiveness of the approach the
24 eligible entity proposes to use in providing

1 services and supports through the partner-
2 ship; and

3 “(C) an assurance that the partnership will
4 collect the information determined by the As-
5 sistant Secretary under subsection (h)(1).

6 “(d) USE OF FUNDS.—An eligible entity that receives
7 a grant under this section shall use the grant funds to
8 establish a community care wrap-around support partner-
9 ship and support the partnership, including requiring the
10 partnership to—

11 “(1) connect each participant with the commu-
12 nity care wrap-around support partnership;

13 “(2) assess each eligible older individual using
14 a standardized assessment instrument, such as a
15 comprehensive assessment reporting evaluation;

16 “(3) establish longitudinal care plans for each
17 eligible older individual; and

18 “(4) provide comprehensive, coordinated, and
19 continuous virtual or in-person access to the services
20 and supports offered under this Act, tailored to the
21 specific needs of the older individual involved, which
22 may include one or more of the following:

23 “(A) Medication management.

1 “(B) Medical nutrition therapy with a reg-
2 istered dietitian for individuals requiring dietary
3 modification for chronic disease management.

4 “(C) Limited environmental modifications,
5 such as safety equipment for showering, bath-
6 ing, or toileting or installation of safety, health,
7 and wellness monitoring technologies for an eli-
8 gible older individual.

9 “(D) Nutritional and dietary supports,
10 which may include nutrition counseling, edu-
11 cation, and the delivery of meals to the home or
12 assistance with purchasing groceries in order
13 to—

14 “(i) assure an appropriate diet con-
15 sistent with the medical needs, cultural
16 background, and faith traditions of an eli-
17 gible older individual; and

18 “(ii) identify opportunities for social-
19 ization within the home or the community
20 of an eligible older individual in order to
21 enhance the ability to participate in
22 healthy nutritional habits.

23 “(E) Transportation in order to meet the
24 medical and social needs of an eligible older in-
25 dividual.

1 “(F) Psychosocial supports to prevent iso-
2 lation and the potential for depression and cog-
3 nitive decline, which often accompany the lack
4 of human interaction.

5 “(G) Opportunities for exercise, as toler-
6 able and appropriate, to prevent further phys-
7 ical decline that may lead to preventable dis-
8 ability.

9 “(H) Opportunities for enjoyment through
10 activities or interactions, in person or virtually,
11 that enhance an eligible older individual’s life,
12 relationships, well-being, or sense of produc-
13 tivity, including providing the opportunities
14 through the use of technology products.

15 “(e) ELECTION TO PARTICIPATE.—The Assistant
16 Secretary shall determine and carry out an appropriate
17 method of ensuring that eligible older individuals have
18 agreed to enroll in a community care wrap-around support
19 partnership program. Enrollment in the demonstration
20 program shall be voluntary.

21 “(f) COMPLIANCE WITH OTHER LAWS.—

22 “(1) REGULATIONS.—Notwithstanding any pro-
23 vision of this section, each eligible entity receiving a
24 grant under this section shall ensure that the activi-
25 ties carried out under the grant comply with the reg-

1 ulations promulgated pursuant to section 264(c) of
2 the Health Insurance Portability and Accountability
3 Act of 1996 (42 U.S.C. 1320d–2 note), the Health
4 Information Technology for Economic and Clinical
5 Health Act (title XIII of division A and title IV of
6 division B of Public Law 111–5), and the amend-
7 ments made by such Act.

8 “(2) GUIDANCE.—The Assistant Secretary shall
9 ensure that the activities carried out under this sec-
10 tion are consistent with the guidance issued by the
11 Secretary on June 6, 2014, for implementing stand-
12 ards for person-centered planning and self-direction
13 in home and community-based services programs,
14 under section 2402(a) of the Patient Protection and
15 Affordable Care Act (42 U.S.C. 1396n note).

16 “(g) PARTNERSHIP INFORMATION COLLECTION.—

17 “(1) DURING THE FIRST YEAR OF THE DEM-
18 ONSTRATION PROGRAM.—

19 “(A) IN GENERAL.—During the first year
20 of the demonstration program, the community
21 care wrap-around support partnership, through
22 the designated care coordinator described in
23 subsection (a)(1)(B)(i), shall maintain a record
24 for each eligible older individual who is served
25 through the demonstration program. Such

1 record shall include detailed information about
2 the services and supports provided to the eligi-
3 ble older individual through the demonstration
4 program and shall be incorporated into the elec-
5 tronic health record of the eligible older indi-
6 vidual.

7 “(B) CONTENTS.—The Assistant Secretary
8 shall determine the information to be collected
9 in each record described in subparagraph (A),
10 which may include information on the types of
11 services and supports provided, referrals, mem-
12 bers of the community care wrap-around sup-
13 port partnership, and an impact statement on
14 the health of the eligible older individual served.

15 “(2) DURING THE SECOND YEAR OF THE DEM-
16 ONSTRATION PROGRAM.—During the second year of
17 the demonstration program, in addition to maintain-
18 ing the record described in paragraph (1), the des-
19 ignated care coordinator described in subsection
20 (a)(1)(B)(i) shall ensure that, through the record de-
21 scribed in paragraph (1), the community care wrap-
22 around support partnership is able to—

23 “(A) determine gaps in the provision of
24 services that can assist in the provision of com-

1 prehensive health and wellness care for the eli-
2 gible older individual;

3 “(B) connect the eligible older individual to
4 services under this Act that will address any
5 such gaps; and

6 “(C) subject to the consent of the eligible
7 older individual, make appointments for the eli-
8 gible older individual to receive needed services
9 and ensure that such participant’s primary care
10 physician and caregiver receive notice of the
11 needs.

12 “(h) DETERMINATION OF THE DEMONSTRATION
13 PROGRAM EFFECT ON PATIENT OUTCOMES.—

14 “(1) TRANSFER OF INFORMATION.—Each eligi-
15 ble entity shall collect, from each community care
16 wrap-around partnership supported by the eligible
17 entity, and report to the Assistant Secretary (in
18 such form and manner, and at such frequency, as
19 shall be specified by the Assistant Secretary) such
20 data as the Assistant Secretary determines to be ap-
21 propriate to monitor and analyze the demonstration
22 program.

23 “(2) INDEPENDENT ANALYSIS OF THE DEM-
24 ONSTRATION PROGRAM.—The Assistant Secretary
25 shall enter into an agreement with an entity to con-

1 duct an independent analysis, in consultation with
2 the Administrator for the Centers for Medicare &
3 Medicaid Services, and make a determination of
4 whether the activities described in subsection (d) re-
5 sult in—

6 “(A) a reduced number of hospital days
7 (other than days an eligible older individual
8 elects to remain in the hospital);

9 “(B) reduced hospital readmissions for eli-
10 gible older individuals;

11 “(C) reduced emergency room visits for eli-
12 gible older individuals;

13 “(D) improved health outcomes commensu-
14 rate, in each individual case, with the eligible
15 older individual’s stage of chronic illness;

16 “(E) improved efficiency of care, such as a
17 reduction of duplicative diagnostic and labora-
18 tory tests, for eligible older individuals;

19 “(F) a reduced cost of health care services;

20 “(G) improved or maintained nutrition sta-
21 tus, to manage chronic disease;

22 “(H) any delay of entry of eligible older in-
23 dividuals into institutional care; and

24 “(I) any other outcomes measures the As-
25 sistant Secretary determines to be appropriate.

1 “(3) IMPACT STUDY.—

2 “(A) EVALUATION.—The Assistant Sec-
3 retary, in consultation with the Administrator
4 for the Centers for Medicare & Medicaid Serv-
5 ices and using the information and data col-
6 lected under this subsection and subsection (g),
7 shall conduct an evaluation of the demonstra-
8 tion program, including comparing the well-
9 being and costs of care of participants in a
10 community care wrap-around support partner-
11 ship program, to the well-being and such costs
12 for patients who have not participated in such
13 a program, to determine the impact of the addi-
14 tional services and supports provided through
15 such a program and shall prepare findings from
16 the evaluation.

17 “(B) DETERMINATION ON EXPANSION.—
18 Based on the evaluation conducted under sub-
19 paragraph (A) and the independent analysis
20 conducted under paragraph (2), the Assistant
21 Secretary, in consultation with the Adminis-
22 trator for the Centers for Medicare & Medicaid
23 Services, shall determine whether expansion of
24 the demonstration program is appropriate. If
25 so, the Assistant Secretary, in consultation with

1 such Administrator, shall prepare a plan speci-
2 fying—

3 “(i) whether the expanded program
4 should involve a greater number of grants
5 to eligible entities, for community care
6 wrap-around support partnership programs
7 based on subsections (a) through (g);

8 “(ii) whether the expanded program
9 should involve grants to regional, state-
10 wide, or multi-State combinations of eligi-
11 ble entities to engage corresponding com-
12 munity care wrap-around support partner-
13 ships in corresponding areas, for such pro-
14 grams based on subsections (a) through
15 (g); and

16 “(iii) whether the expanded program
17 should be carried out through the Adminis-
18 tration on Aging and the Center for Medi-
19 care and Medicaid Innovation.

20 “(4) REPORT TO CONGRESS.—Not later than 1
21 year after the end of the demonstration program,
22 the Assistant Secretary shall submit to Congress a
23 report containing the findings, the results of the
24 independent analysis, the determination, and any
25 plan, prepared under paragraphs (1) through (3).

1 “(5) EXPANDED PROGRAM.—Subject to the
2 availability of appropriations, if the report contains
3 a plan prepared under paragraph (3)(B), the Assistant
4 Secretary may implement the expanded program,
5 in accordance with the plan, not sooner than
6 months after submission of the report.

7 “(i) IMPLEMENTATION DATE.—Not later than Janu-
8 ary 1, 2015, the Assistant Secretary shall issue a request
9 for proposals to carry out this section.

10 “(j) AUTHORIZATION OF APPROPRIATIONS.—There
11 are authorized to be appropriated to carry out this section
12 such sums as may be necessary for each of fiscal years
13 2015 through 2019.”.

14 **SEC. 8. PREVENTION OF ELDER ABUSE, NEGLECT, AND EX-
15 PLOITATION.**

16 (a) INTERVENTION OR DEVICES.—Section
17 712(a)(3)(H) of the Older Americans Act of 1965 (42
18 U.S.C. 3058g(a)(3)(H)) is amended—

19 (1) in clauses (ii) and (iii), by striking “and”
20 at the end;

21 (2) in clause (iii), by striking “provide technical
22 support for” and inserting “actively encourage and
23 assist in”; and

24 (3) by adding at the end the following:

1 “(iv) identify interventions or devices (in-
2 cluding adult bed rails) that affect the rights
3 and safety of residents, including the use of
4 chemical and physical restraints; and
5 “(v) educate providers, residents, and fam-
6 ilies about the danger of those interventions
7 and devices; and”.

8 (b) USE OF ALLOTMENTS.—Section 721(e)(2) of the
9 Older Americans Act of 1965 (42 U.S.C. 3058i(e)(2)) is
10 amended, in the matter preceding subparagraph (A), by
11 striking “report” and all that follows through “subsection
12 (b)(9)(B)(ii),” and inserting “report described in sub-
13 section (b) or a related referral”.

14 **SEC. 9. PREVENTION OF FINANCIAL ABUSE, FRAUD, AND**
15 **OTHER FINANCIAL EXPLOITATION.**

16 (a) AUTHORIZATION OF APPROPRIATIONS.—Section
17 702 of the Older Americans Act of 1965 (42 U.S.C.
18 3058a) is amended—

19 (1) in subsection (c), by striking “chapter 4”
20 and inserting “chapter 5”; and

21 (2) by inserting after subsection (b) the fol-
22 lowing:

23 “(c) PREVENTION OF FINANCIAL ABUSE, FRAUD,
24 AND OTHER FINANCIAL EXPLOITATION.—There are au-

1 thorized to be appropriated to carry out chapter 4, such
2 sums as may be necessary for each fiscal year.”.

3 (b) PROGRAM.—Subtitle A of title VII of the Older
4 Americans Act of 1965 (42 U.S.C. 3058 et seq.) is amend-
5 ed—

6 (1) by redesignating chapter 4 and section 731
7 as chapter 5 and section 736, respectively; and
8 (2) by inserting after chapter 3 the following:

9 **“CHAPTER 4—PROGRAMS FOR PREVEN-**
10 **TION OF FINANCIAL ABUSE, FRAUD,**
11 **AND OTHER FINANCIAL EXPLOI-**
12 **TATION**

13 **“SEC. 731. PREVENTION OF FINANCIAL ABUSE, FRAUD, AND**
14 **OTHER FINANCIAL EXPLOITATION.**

15 “(a) ESTABLISHMENT.—In order to be eligible to re-
16 ceive an allotment under section 703 from funds appro-
17 priated under section 702 and made available to carry out
18 this chapter, a State agency shall, in accordance with this
19 section, and in consultation with area agencies on aging,
20 develop and enhance programs to address elder abuse, ne-
21 glect, and exploitation (including financial abuse, fraud,
22 and other financial exploitation).

23 “(b) USE OF ALLOTMENTS.—The State agency shall
24 use an allotment described in subsection (a) to carry out,
25 through the programs described in subsection (a), activi-

1 ties to develop, strengthen, and carry out programs for
2 the prevention, detection, assessment, and treatment of,
3 intervention in, investigation of, and response to elder
4 abuse, neglect, and exploitation (including financial abuse,
5 fraud, and other financial exploitation), including activi-
6 ties that—

7 “(1) fund programs that focus on outreach and
8 education to older individuals and their families and
9 support networks, on elder abuse, neglect, and ex-
10 ploitation (including financial abuse, fraud, and
11 other financial exploitation);

12 “(2) promote and enhance programs, such as
13 the Gatekeeper program, that train postal carriers,
14 financial institutions, firefighters, meter readers,
15 and other community professionals who are in a po-
16 sition to observe an older individual on a daily or
17 regular basis—

18 “(A) to identify signs of elder abuse, ne-
19 glect, and exploitation (including financial
20 abuse, fraud, and other financial exploitation);
21 and

22 “(B) to report such signs to the State
23 agency responsible for adult protective services
24 or an area agency on aging;

1 “(3) create a position for a statewide coordi-
2 nator on elder abuse, neglect, and exploitation (in-
3 cluding financial abuse, fraud, and other financial
4 exploitation), within each State agency responsible
5 for adult protective services or law enforcement, to
6 act as a liaison with various financial institutions in-
7 cluding the State agency responsible for consumer
8 protection;

9 “(4) provide funding to States and area agen-
10 cies on aging for trainers who are able to conduct
11 outreach and education for older individuals in their
12 natural living environment on—

13 “(A) identifying signs of elder abuse, ne-
14 glect, and exploitation (including financial
15 abuse, fraud, and other financial exploitation);

16 “(B) how to respond to practices described
17 in subparagraph (A); and

18 “(C) how to get help from local resources;

19 “(5) fund programs that capture data, and per-
20 form data analysis, on the prevalence of elder abuse,
21 neglect, and exploitation (including financial abuse,
22 fraud, and other financial exploitation) at the State
23 and national level;

24 “(6) provide intake workers or hotlines that are
25 able to take calls directly from older individuals,

1 their family members, and community professionals
2 in their planning and service areas, about elder
3 abuse, neglect, and exploitation (including financial
4 abuse, fraud, and other financial exploitation);

5 “(7) provide funding to States and area agen-
6 cies on aging for the services of forensic accountants
7 to track and identify elder abuse, neglect, and ex-
8 ploitation (including financial abuse, fraud, and
9 other financial exploitation);

10 “(8) fund programs and arrangement that will
11 safeguard victims’ or potential victims’ finances,
12 such as daily money management programs and
13 conservatorships; and

14 “(9) fund pilot programs to test innovative
15 practices in local communities, to develop partner-
16 ships across disciplines for the prevention, investiga-
17 tion, and prosecution of elder abuse, neglect, and ex-
18 ploitation (including financial abuse, fraud, and
19 other financial exploitation).”.

20 (c) CONFORMING AMENDMENT.—Section 202(a)(23)
21 of the Older Americans Act of 1965 (42 U.S.C.
22 3012(a)(23)) is amended by striking “sections 307(a)(18)
23 and 731(b)(2)” and inserting “section 307(a)(13) and sec-
24 tion 736”.

